INSURANCE BINDER

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT.

Binder No.
UMU001104415

Name and Address of Agency

Sun Valley Insurance Inc.
6043 W. North Avenue
Oak Park , Illinois 60302
(708) 848-4479

Company

United Automobile Insurance Co.

(708) 848-4479

Effective Date   05/04/2007

Expiration Date   01/20/2008   ☐ 12:01 AM   ☐ Noon

☐ This binder is issued to extend coverage in the above named company per existing policy #   UMU001104415

Name and Mailing Address of Insured

Gatlin, George
220 Highpoint Dr. #105
P.O. Box#5333 Forest Pk. Il. 60305
Romeoville, IL 60446

Description of Operation/Vehicles/Property

2006 Chrysler 300 Touring #2C3KA53G86H458101

	Type and Location of Property		Coverage/Perils/Forms	Amt of Insurance	Ded	Coins %
P R O P E R T Y						

	Type of Insurance	Coverage/Forms	Limits of Liability		
L I A B I L I T Y	☐ Scheduled Form ☐ Comprehensive Form			Each Occurance	Aggregate
	☐ Premises/Operations		Bodily Injury		
	☐ Products/Completed Operations		Property Damage		
	☐ Contractual		Bodily Injury Property Damage Combined		
	☐ Other (specify below)				
	☐ Med Pay		Personal Injury		
	☐ Personal Injury Per Person Per Accident ☐A ☐B ☐C				

	Type of Insurance		Limits of Liability	
A U T O M O B I L E	☐ Liability ☐ Non-owned ☐ Hired			
	☑ Comprehensive-Deductible 500		Bodily Injury (each person)	20,000
	☑ Collision-Deductible 500		Bodily Injury (each accident)	40,000
	☑ Medical Payments 1,000		Property Damage	15,000
	☑ Uninsured Motorist 20/40,000			
	☐ No Fault (specify)		Bodily Injury Property Damage Combined	
	☐ Other (specify)			
	☐ WORKER'S COMPENSATION - Satutory Limits (specify states below)		☐ EMPLOYER'S LIABILITY - Limit	

SPECIAL CONDITIONS/OTHER COVERAGES

Name and Address of   ☐ Mortgagee   ☐ Loss Payee   ☐ Add'l Insured   Loan Number
TO BE ASSIGNED

Signature of Authorized Representative   05/04/2007
                                                          Date

EXHIBIT
I